PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

24737

7590

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

08/31/2009

PHILIPS INTELLECTUAL PROPERTY & STANDARDS

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as address as an address, and on the ordered otherwise in Block 1, 19, 00 specifying a new correspondence address, and/or (b) indicating a reporter FEE ADDRESS for in Block 1, 19 or specifying and correspondence address, and/or (b) indicating a reporter FEE ADDRESS for the Block 1 for my change of address)

CURRINT CORRESPONDENCE ADDRESS folias: Use Block 1 for my change of address)

Note: A certificate of maining can only be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of maining or transmission.

P.O. BOX 3001 BRIARCLIFF N	1ANOR, NY 10510)	addı	essed to the Mail Sto	ufficient postage for firs p ISSUE FEE address 571) 273-2885, on the d	at class mail in an envelope above, or being facsimile ate indicated below.
						(Depositor's name)
						(Signature)
						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		FORNEY DOCKET NO.	CONFIRMATION NO.
10/567,221 02/03/2006		Babak Movassaghi		DE030290US1	9537	
TITLE OF INVENTION	: DEVICE AND METH	OD FOR GENERATING	A THREE DIMENSION	AL VASCULAR MOD	EL	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	11/30/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS			
RUSH, ERIC		2624	382-128000			
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 			2. For printing on the patent front page, list			
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(I) the names of up to 3 registered patent attorneys or agents OR, alternatively,			
			(2) the name of a single firm (having as a member a 2-registered attorney or agent) and the names of up to 2-registered patent attorneys or agents. If no name is listed, no name will be printed.			
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.						
			THE PATENT (print or type			
PLEASE NOTE: Un recordation as set fort	less an assignee is ident h in 37 CFR 3.11. Com	ified below, no assignee pletion of this form is NO	data will appear on the p T a substitute for filing an	atent. If an assignee is assignment.	identified below, the de	ocument has been filed for
(A) NAME OF ASSI			(B) RESIDENCE: (CITY and STATE OR COUNTRY)			
KONINKLIJ	KE PHILIPS	ELECTRONICS	N.V. EINI	DHOVEN, THE	NETHERLAND	S
Please check the appropr	iate assignee category or	categories (will not be pr	inted on the patent):	Individual 🖾 Corpor	ation or other private gro	oup entity Government
4a. The following fee(s)	are submitted:	41	o. Payment of Fee(s): (Plea	se first reapply any p	eviously paid issue fee	shown above)
Issue Fee			A check is enclosed.			
□ Publication Fee (No small entity discount permitted) □ Advance Order - # of Copies			Payment by credit card. Form PTO-2038 is attached. Payment by credit card. Form PTO-2038 is attached.			
Advance Order	# of Copies		overpayment, to Depo	sit Account Number	14 ⁴ 1270 enclose a	n extra copy of this form).
 Change in Entity Sta a. Applicant claim 	tus (from status indicate is SMALL ENTITY stat		☐ b. Applicant is no lon	ger claiming SMALL E	NTITY status. See 37 Cl	FR 1.27(g)(2).
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req records of the United Sta	uired) will not be accepte ites Patent and Trademark	d from anyone other than t	he applicant; a registero	d attorney or agent; or th	ne assignee or other party in
Authorized Signature			Date November 30, 2009			
Typed or printed nam			Registration No. 45799			
This collection of inform an application. Confiden submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223	nation is required by 37.0 tiality is governed by 35 d application form to the ions for reducing this bu 'irginia 22313-1450. DO k13-1450.	CFR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the ONOT SEND FEES OR	on is required to obtain or r 1.14. This collection is est depending upon the indiv e Chief Information Office COMPLETED FORMS TO	etain a benefit by the p imated to take 12 minu idual case. Any comm er, U.S. Patent and Trac D THIS ADDRESS. SE	ablic which is to file (and tes to complete, including ents on the amount of tire emark Office, U.S. Dep ND TO: Commissioner	by the USPTO to process) g gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

OMB 0651-0033